DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Docket Number: <u>UIA-030.01</u>

DIAGNOSTICS AND THERAPEUTICS FOR ARTERIAL WALL DISRUPTIVE DISORDERS

the specification of which (c		x) is attached hereto.) was filed on, an	as United States A d was amended on	pplication Number (if applicable).
I hereby state that I have i claims, as amended by any			f the above identified spec	cification, including the
I acknowledge the duty to di Regulation, §1.56.	sclose information	which is material to pa	itentability as defined in Tit	le 37, Code of Federal
I hereby claim foreign priorit patent or inventor's certificat certificate having a filing da	e listed below and l	have also identified be	ow any foreign application	
Prior Foreign Application(s)	1			Priority Claimed
(Number)	(Coun	try)	(Day/Month/Year Filed)	() Yes () No
(Number)	(Coun	try)	(Day/Month/Year Filed)	() Yes () No
I hereby claim the benefit u application(s) listed below.	nder Title 35, Unite	ed States Code, § 119	(e) of any United States Pr	ovisional
60/120,822 (Application Number)	February 19, 19 (Filing Date)	99		
60/120,668 (Application Number)	February 19, 19 (Filing Date)			
60/123,052 (Application Number)	March 5, 1999 (Filing Date)			
I hereby claim the benefit ur insofar as the subject matter in the manner provided by the information which is materia available between the filin application.	r of each of the clair ne first paragraph o Il to patentability as	ns of this application is f Title 35, United State defined in Title 37, Co	not disclosed in the prior U s Code, § 112, I acknowled ode of Federal Regulations	nited States application ge the duty to disclose , § 1.56 which became
(Application Number)		(Filing Date)	(Status: patent	, pending, abandoned)
(Application Number)		(Filing Date)	(Status: patent	, pending, abandoned)

I hereby appoint Beth E. Arnold, Reg. No. 35,430; Charles H. Cella, Reg. No. 38,099; Isabelle M. Clauss, Reg. (see attached); Kirk Damman, Reg. No. 42,461; Jason Gish, Reg. No. 42,581; Dana Gordon, Reg. No. 44,719; David P. Halstead, Reg. No. 44,735; Edward J. Kelly, Reg. No. 38,936; Robert A. Mazzarese, Reg. No. 42,852; Chinh Pham, Reg. No. 39,329; Wolfgang E. Stutius, Reg. No. 40,256; Matthew P. Vincent, Reg. No. 36,709; and Anita Varma, Reg. No. 43,221 as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all telephone calls to Beth E . Arnold at telephone number (617) 832-1000.

Address all correspondence to:

Patent Group

Foley, Hoag & Eliot LLP One Post Office Square Boston, MA 02109-2170

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): <u>Gregory S</u>	. Hageman
Inventor's signature	Date
500 Auburn Hills Drive, Coralville, IA 52241 Residence	U.S. Citizenship
Post Office Address (if different)	